CHULA VISTA POLICE DEPARTMENT SECONDHAND DEALER OWNER RENEWAL APPLICATION

NAME OF	BUSINESS:				_	
ADDRESS	OF BUSINESS:					
OWNER NAME:Last		First	First		Middle	
HOME ADI	DRESS:		City	Zip Code		
HOME #:		BU	BUSINESS #:			
EMAIL AD	DRESS :					
	CONVICTIONS IN The sellist on back side of	THE PAST 12 MONTHS of this application.)	S: YES	NO		
EXPIRATION	ON DATE OF PERM	IT:	DATE OF BIRTH:			
SOCIAL SI	ECURITY #:		CDL #:			
HEIGHT: _	WEIGHT:	HAIR COLOR:	EYE COLOR	: AGE:		
> >	125) Money Order or of Justice (DO. Cash, check or of Chula Vista fo Copy of governr	Secondhand Deale Cashiers Check for I) for processing Sta money order in the or each applicant. ment I.D. to taken within the la	* \$300.00, pa y te License. amount of \$1	yable to the Dep	artment	
		E IN THE CITY OF (E AND A POLICE C				
I CERTIF ACCURA		FORMATION PROV	IDED ON TH	IS FORM IS TRU	E AND	
Signature)			Date		

License is valid for two years.

FALSIFICATION OF ANY INFORMATION ON THIS FORM IS GROUNDS FOR DISQUALIFICATION.

ALL FEES ARE NON REFUNDABLE

Please contact (619) 691-5244 if you require additional information. Forms are available for printing at: www.chulavistapd.org on the Controlled Licenses page.

1C3 REV 12/13 lg